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\*\* CONTINUING DATA \*\*\*\*\*  
*None, Ew*\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None, Ew*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/02/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CO	SHEETS DRAWING 8	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and  
AcknowledgedExaminer's Signature *EW* Initials *EW*ADDRESS  
22879

## TITLE

Information management system and method

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